

Chicago Flu Update



City of Chicago

Rahm Emanuel, Mayor

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Previous Chicago Flu Updates

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What is the risk?

Currently, the risk of influenza infection in the Chicago area is low. Since August 2011, CDC has identified 12 human infections in five states with influenza A (H3N2)v viruses that contain a gene from the A(H1N1)pdm09 virus, and surveillance for additional human cases has been enhanced in those areas. (Note that a recently adopted naming convention for influenza viruses that commonly circulate in swine uses a "v" (for "variant") when these viruses infect humans. Influenza viruses identified in swine populations will continue to be referred to as "swine influenza" viruses. Pandemic influenza A (H1N1) 2009 viruses are now referred to as influenza A (H1N1)pdm09). Since October 2011, less than two percent of the 24,654 specimens tested for influenza at collaborating laboratories across the U.S. have been positive, with 86% of these being influenza A. Vaccination is the best way to protect against human seasonal influenza infection and all Chicagoans aged six months and older are encouraged to get vaccinated. Chicagoans should ask their healthcare provider or pharmacist about vaccine availability. Uninsured individuals and those with insurance that does not cover flu shots can obtain a voucher for a free flu shot at Walgreens. The Chicago Department of Public Health has influenza vaccine available at CDPH immunization clinics.

Are severe cases of influenza occurring?

One influenza-associated ICU hospitalization was reported for week 51 (December 18-24, 2011), positive for influenza B by rapid test. This is the first influenza-associated ICU hospitalization reported so far this season. Suspected novel influenza, pediatric influenza-associated deaths, and influenza-associated ICU hospitalizations should all be reported to CDPH via INEDSS³. Outbreaks of influenza-like illness in a congregate setting are also reportable; in Chicago these reports can be made by phone to (312) 746-5911.

How much influenza-like illness is occurring?

For the week of December 18-24, 2011, with 14 hospitals reporting, 2.6% of emergency room visits were due to ILI (i.e., fever of 100°F or greater, with cough or sore throat). This is the fourth consecutive week that a decrease has been noted (Figure 1). From December 18-24, 2011, with 15 outpatient clinics reporting, 2.4% of outpatient clinic visits were due to ILI. This is similar to levels reported during the same surveillance week in 2010 (Figure 2).

Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza subtyping. For the week of December 18-24, 2011, with 5 laboratories reporting, 1 of the 178 specimens tested for influenza was positive, typed as influenza B. Since October 2011, 4 out of the 1,625 specimens tested for influenza have been positive, with 2 typed as influenza A (1 H3 and 1 not subtyped) and 2 typed as influenza B.

Where can I get more information?

The Centers for Disease Control and Prevention's FluView⁴ report provides national updates and trends related to the intensity of influenza activity across the United States, as well as detailed information on antiviral resistance, severity of illness, and other topics. Updates specific to Illinois⁵ and Suburban Cook County⁶ are also available online.

Figure 1. Weekly reported percent of <u>emergency department visits</u> attributed to influenza-like illness, Chicago, by week, for current season (2011-2012) and previous two seasons, October-May.

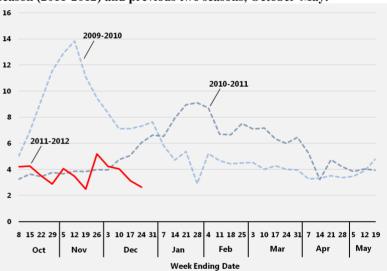


Figure 2. Weekly reported percent of <u>outpatient</u> clinic visits attributed to influenza-like illness, Chicago, by week, for current season (2011-2012) and previous season (Chicago and Illinois), October-May.

